PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10657035

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			1 nir	us 20=	*	0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			1 mi	nus 3 =	*	0		X43=		OR	X86=	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	ess than zero, enter "0" in c			column 2	ı	TOTAL	375	OR	TOTAL	
	С	LAIMS AS A	MENDED					SMALL ENTITY			OTHER THAN SMALL ENTITY	
	(Column 1)		_	(Colum		(Column 3)	3)	OWALL		OR		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		1	+145=		OR	+290=	
	TOTAL										TOTAL	
		A	ADDIT. FEE		OH:	ADDIT. FEE						
		_		يت	·							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* **	Minus	***		=	. [X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		,	+145=		OR	+290=	
										OR	TOTAL ADDIT. FEE	·
(Column 1) (Column 2) (Column 3)												
		CLAIMS	1	HIGH		T (COIGITHT O)	1 -			٠,		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	_	=	╽┟	X43=		OR	X86=	
_	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		∫ ├			`		
										OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												
	The "Highest Num	her Previously Pai	d For" (Total or	Independe	ant) ie the	highest number	er foui	nd in the app	ropriate box	c in col	umn•1.	